



STATE OF WASHINGTON
DEPARTMENT OF LABOR AND INDUSTRIES

Ambulatory Surgery Center Fee Schedule

Effective for Dates of Service on or After
August 1, 2003*

***Modified since original posting**

Last Modified 7/24/2003

Copyright Information

Physicians' Current Procedural Terminology (CPT[®]) five-digit codes, descriptions, and other data only are copyright 2002 American Medical Association. All Rights Reserved.

No fee schedules, basic units, relative values or related listings are included in CPT.

AMA does not directly or indirectly practice medicine or dispense medical services.

AMA assumes no liability for data contained or not contained herein.

CPT[®] is a registered trademark of the American Medical Association.

This document is available in alternative formats to accommodate persons with disabilities. For assistance, call 1-800-547-8367. (TDD/TTY users, please call 360-902-5797). Labor and Industries is an Equal Opportunity employer.

KEY TO AMBULATORY SURGERY CENTER FEE SCHEDULE

Column Title	Title Explanation	Indicator	Indicator Description
CPT® CODE/ HCPCS CODE			2003 CPT® or HCPCS code
ABBREVIATED DESCRIPTION			Descriptions are abbreviated and are for reference purposes only. For complete descriptions, refer to a 2002 CPT® or HCPCS code book.
PAYMENT GROUP	L&I's ASC Payment Group	Number (1-14)	Indicates L&I's ASC payment group for the procedure code.
RATE	L&I's ASC Payment Rate	Dollar value or payment method	Indicates the maximum allowable fee or other payment method.
		Dollar value	Maximum allowable fee.
		AC	Paid at acquisition cost.
		BR	Paid by report.
		BR, UR	Paid by report, UR authorization required.
		Bundled	Payment included in facility payment.
		NC	Not Covered
WHAT CHANGED			Listing of the changes made to the particular code entry
DATE CHANGED			The date that the change was made to the entry.

